



**Exam Date/Location (please write where and when you'll be taking the exam).**

---

**Please check all that apply**

- ☐ Check here if you are taking the CISSN
- ☐ Check here if you are taking the SNS

Check your payment category below

- ☐ ISSN Professional Members - \$300
- ☐ ISSN Student Members - \$149
- ☐ Non-members - \$350

Please Fax or Mail Both Pages

Name \_\_\_\_\_

Terminal Degree (BA/BS/MS/PhD/MD/DO/DC, etc) \_\_\_\_\_

Address (Street/City/State/Country/Zip Code) \_\_\_\_\_

---

---

***The ISSN may ask you to provide proof of graduation with a 4-year degree***

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

ISSN Membership ID number: \_\_\_\_\_

What is your primary job responsibility?

- ☐ Academics (Professor, Post-Doc, Lab Tech, etc)
- ☐ Student
- ☐ Registered Dietitian
- ☐ Sports Nutritionist
- ☐ Exercise Physiologist
- ☐ Strength and Conditioning Professional
- ☐ Personal Trainer
- ☐ Industry (owner, manager, marketing, sales, etc)
- ☐ Other: \_\_\_\_\_



Payment Method (please check which applies)

**Total = \$ \_\_\_\_\_**

Check ☐

Credit Card ☐ – circle one (Visa / Mastercard / American Express)

Credit Card # \_\_\_\_\_

Expiration Date \_\_\_\_\_

Name that appears on card \_\_\_\_\_

Signature \_\_\_\_\_

Pay via fax or mail to:

International Society of Sports Nutrition

Maelu Fleck

600 Pembroke Drive

Woodland Park, CO 80863

Phone: 1-866-740-4776;

Fax: 1-719-687-5184; Email: [issn.sports.nutrition@gmail.com](mailto:issn.sports.nutrition@gmail.com)